

POST OFFIC	E	EXPRESS MAII	* * E L 5	52914563US*	
OAIGIN (POSTAL USE ONLY) PO ZIP Code BONNES 19-30  O 1 / 2 8		S POSTAL SERVICE TM	en e	2914563U	
Time b	12 Noon	Insurance Fee	SERVICE GUARA	CE COVERAGE	22 2000 8 USPS USPS
Weekland Holiday  CUSTOMER USE ONLY  METHOD OF PAYMENT: Express Mail Corporate Acct. No.  121/18 111111111111111111111111111111111	40848	WAIVER OF SIGNA I wish delivery to be no it it at article can be left adelivery. NO DELIVERY. Wee	TURE (Domestic Only): Additional merc nade without obtaining signature of ad in secure location) and I authorize that in the control that the control that location and the control that the control that location is the control that the control t	delivery employee's signature constitu	sature is requested.  y employee judges.  area vaid proof of
STEPHEN C. DI PATENT DEPAR MURRISON & F 425 MARKET S SAN FRANCISC	- CA 0/10	5÷2406 86	FE ASSISTANT F PATENTS S PATENT & TE OX PATENT AP	COMMISSIONER RADEMARK OFFI PLICATION: DC 2023	
L	STATE OF TRACKING	RE G CALL 1-800-222			

**EXHIBIT 2**